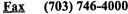
PART B - FEE(S) TRANSMITTAL

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	E ADDRESS (Note: Use Block 1 for	any change of address)	<u> </u>	Fee(s) Transmittal. The papers. Each addition	f mailing can only be used f his certificate cannot be used al paper, such as an assignm te of mailing or transmission.	for any other accompanying	
JACOBSON HOLMAN PLLC 400 SEVENTH STREET N.W. SUITE 600 WASHINGTON, DC 20004				Ce I hereby certify that t States Postal Service addressed to the Ma	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
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12/28/2004 CNGUYEN1 00000109 10607998						(Signature)	
01 FC:1501 02 FC:1504	1501 1400.00 OP 1504 300.00 OP					(Date)	
APPLICATION NO.	FILING DATE	1	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/607,998	10/607,998 06/30/2003 Seaung Suk I			Suk Lee	P68944US0	8193	
TITLE OF INVENTION: M	ETHOD FOR MANUFACT	URING MTJ CEL	L OF MAG	NETIC RANDOM ACCESS M	IEMORY		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330- \$1400		\$300	-\$1630- _ \$1700	12/27/2004	
EXAMINER		ART UNIT		CLASS-SUBCL ASS] '		
BERRY, RENEE R		2818		438-003000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	Γ (print or type)			
PLEASE NOTE: Unless		low, no assignee	data will app	ear on the patent. If an assig	nee is identified below, the o	locument has been filed for	
(A) NAME OF ASSIGNEE Hynix Semiconductor Inc. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Gyeonggi~do, KOREA							
Please check the appropriate	assignee category or catego	ries (will not be pri	nted on the p	oatent): 🗖 Individual 🖺 C	Corporation or other private gr	oup entity Government	
4a. The following fee(s) are	enclosed:	4b	. Payment of	` '	*		
_				in the amount of the fee(s) is e			
					credit card. Form PTO-2038 is attached. (1700) r is hereby authorized by charge the required fee(s), or credit any overpayment, to the things of this form. t Number 06-1358 (enclose an extra copy of this form).		
Advance Order - # or	Copies		Deposit Acc	ount Number 06-1358	(enclose an extra	copy of this form).	
5. Change in Entity Status	•					NED 1 27/ \/2\	
	MALL ENTITY status. See is requested to apply the Issu			ant is no longer claiming SMA			
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Authorized Signature	MMM	rulle	1	. Date <u>27</u>	December 2004		
Typed or printed name Allen S. Melser Registration No. 27, 215							
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